



# Dual Credit Drop/Add Form

Year: 20\_\_\_\_ Term:  Fall  Spring  Summer

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ LSCS ID# \_\_\_\_\_  
(Please Print Legibly)

Current School: \_\_\_\_\_ Grade Level: \_\_\_\_\_

**Drops:** I understand I must present this form to a LSCS advisor in order to completely drop/withdraw from this course(s). If official day of record according to LSCS calendar, I understand my college transcript will indicate a "W" for withdraw course. Standard LSCS refund policies apply.

**To Be Completed by High School Principal or Designee**

**DROPS**

CLASS #	SUBJECT	CATALOG #	SECTION #	APPROVAL

**ADDS**

CLASS #	SUBJECT	CATALOG #	SECTION #	APPROVAL

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

High School Designee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student Services Representative: \_\_\_\_\_

Date: \_\_\_\_\_